



David Goldblum, Principal
Dr. Jessica Fitzgerald, Assistant Principal

School Counselor/Teacher Recommendation Form

Instructions: Please give this form to your child's school counselor or teacher to be completed before the end of the school year. Once completed, place the form in the pre-addressed, stamped envelope and mail back to Pathways. Course placements will be based on recommendations, student achievement data and student/parent input.

Student Name: _____ Counselor/Teacher Name: _____

Current School: _____

Current language arts grade: ____

Recommended language arts course:

____ Reading (an intervention course for students 1-3 years below grade level)

____ English I

Testing results data in language arts:

Current math course: _____ Grade: ____

Recommended math course:

____ Algebra 1

____ Algebra II _____ Algebra II Honors

____ Other: _____

Testing results data in math:

Any other pertinent academic, behavioral or social/emotional information on student:

****Please provide a copy of the latest report card and testing data for the student****